

Application No. 10/073,377
Applicant: Gerd Hobom et al.
Response to Restriction Requirement

CONDITIONAL PETITION FOR EXTENSION OF TIME

If entry and consideration of the amendments above requires an extension of time,
Applicants respectfully request that this be considered a petition therefor. The Commissioner is
authorized to charge any fee(s) due in this connection to Deposit Account No. 14-1263.

ADDITIONAL FEE

Please charge any insufficiency of fees, or credit any excess, to Deposit Account No. 14-
1263.

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100725-14**PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)****CERTIFICATE OF FACSIMILE TRANSMISSION**

I hereby certify that this Petition for Extension of Time is being transmitted via facsimile to the United States Patent and Trademark Office on the 23rd day of January, 2004


David D. KimIn re Application of
Gerd Hobom et alApplication Number
10/073,377Filed
February 8, 2002For
Influenza Viruses with Enhanced Transcriptional and Replicative CapacitiesArt Unit
1648Examiner
B.Q. Li

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- | | |
|--|------------------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$ _____ |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$ _____ |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$ <u>950.00</u> |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$ _____ |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$ _____ |
|
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.26. Therefore, the fee amount shown above is reduced by one-half the resulting fee is : \$ <u>475.00</u> . | |
| <input type="checkbox"/> A check in the amount of the fee is enclosed. | |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. | |
| <input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account. | |
| <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>14-1263</u> .
I have enclosed a duplicate copy of this sheet. | |

I am the applicant/inventor

- assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- attorney or agent of record.
- attorney or agent under 37 CFR 1.34(a).
Registration number if acting under 37 CFR 1.34(a) 53,123

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

January 23, 2004
Date

(212) 808-0700
Telephone Number


Signature

David D. Kim
Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.136(a). This information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is covered by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 5 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450 Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.